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STATEMENT OF

FORM 1	ORGANIZATION	Office Use Only
NAME OF COMMITTEE (in fu	(Check if name Example: If typing, type is changed) ever the lines.	12FE4M5
EXELIS Inc.	.Employees PAC	
	,1650 Tysons Blvd.	
ADDRESS (number and		
(Check if addr	Suite 1700	
is changed)	McLean	VA 22102
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL (Check if ad	ADDRESS (Please provide only one e-mail address) slruhl@comerica.com	
is changed)		
COMMITTEE'S WEB PA		
2. DATE 11	07 2011	
3. FEC IDENTIFICA	TION NUMBER C C00141002	
4. IS THIS STATEME	NEW (N) OR X AMENDED (A)	
I certify that I have exa	amined this Statement and to the best of my knowledge and belie Treasurer Andrew Renauld	of it is true, correct and complete.
Signature of Treasurer	Andrew Renauld [Electronically Filed]	Date 11 07 2011
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signir ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
Office Use Only	For further informatio Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	ission FEC FURIVI 1